

# County of Los Angeles Department of Mental Health

## Student Professional Development Program

**2015-2016 Academic Year**

*Complete this form for each discipline to be placed at this agency:*

Service  
Area

**4**

- |  |  |
|--|--|
| <input type="checkbox"/> Psychology<br><input type="checkbox"/> Practicum<br><input type="checkbox"/> Externship<br><input type="checkbox"/> Internship<br><input checked="" type="checkbox"/> Social Work<br><input checked="" type="checkbox"/> Specialization : <u>FAMILY ADVOCACY</u><br><input type="checkbox"/> Macro/Administrative | <input type="checkbox"/> Nursing<br><input type="checkbox"/> Marriage Family Therapist<br><input type="checkbox"/> Occupational Therapy<br><input type="checkbox"/> Other (specify): _____ |
|--|--|

<b>DMH Agency:</b>	Office of Consumer and Family Affairs
<b>DMH Agency Address:</b>	550 S. Vermont Avenue, Suite 502 Los Angeles, CA 90020
<b>DMH Agency Liaison:</b>	Isidoro Gonzalez / Hera Patail
<b>New or Returning:</b>	<input type="checkbox"/> New <input checked="" type="checkbox"/> Returning
<b>Liaison Email Address:</b>	igonzalez@dmh.lacounty.gov
<b>Liaison Phone Number:</b>	213-738-3948
<b>Liaison Fax Number:</b>	213-252-8767
<b>Agency ADA accessible</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "No" identify:

### Student Requirements:

<b>How many positions will you have?</b>	4-6
<b>Beginning and ending dates:</b>	Academic year

### Student Schedule:

<i>Please indicate days and times students should be available to provide services, including mandatory staff meetings (SM), training seminars (TR), supervision (SUP), etc.</i>	
<b>Monday</b>	8-5
<b>Tuesday</b>	8-5
<b>Wednesday</b>	8-5
<b>Thursday</b>	8-5
<b>Friday</b>	8-5

<b>Total hours expected to be worked per week:</b>	20
<b>Number of direct client hours per week anticipated:</b>	15
<b>Expected average consumer caseload:</b>	Varies based on referrals
<b>What cultural groups typically received services at your site?</b>	all

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### Description of Site: *(Please describe the type of Agency setting and services offered)*

Office of Consumer and Family Affairs represents the voice of consumers and family members with mental illness in county wide Department of Mental Health. Reporting to the Director of the DMH, the office includes consumer and family quality improvement throughout all the county programs, both directly operated and contracted clinics. In this internship role, students will be exposed to family concern resolution regarding connection to mental health services, including jail, psychiatric hospital, FSP referral, Public Guardian conservatorship, National Alliance on Mental Illness (NAMI) supportive programs and group process through SAMHSA's Family Psycho-Education toolkit.

### Target population and types of services provided: *(please check all that apply)*

<input checked="" type="checkbox"/> Individuals	<input checked="" type="checkbox"/> Psychoeducational groups (e.g. Parenting
<input checked="" type="checkbox"/> Groups	<input checked="" type="checkbox"/> Community Outreach
<input checked="" type="checkbox"/> Families	<input checked="" type="checkbox"/> Brief treatment to mid-term treatment
<input type="checkbox"/> Children & Adolescents	<input type="checkbox"/> Long term treatment
<input checked="" type="checkbox"/> Adults	<input checked="" type="checkbox"/> Crisis Intervention
<input type="checkbox"/> Older Adults	<input checked="" type="checkbox"/> Screening and Assessment
<input checked="" type="checkbox"/> Court/Probation referred	<input type="checkbox"/> Psych Testing <i>(For psychology students only)</i>
<input checked="" type="checkbox"/> Consultation/Liaison	<input type="checkbox"/> Other <i>(specify):</i>

### What are the most frequent diagnostic categories of your client population?

Family care-giver burden due to schizophrenia, psychotic d/o, mood d/o and substance use.

### What specific (perhaps unique) training opportunities do students have at your agency?

Students will be given weekly training in Family Advocacy as well as all training offered at DMH.

### What evidence based practices or theoretical orientations will students be exposed to at this site?

Seeking Safety, MI, CORS, FPE, CBT, and others offered by DMH.

### Do students have the opportunity to work in a multidisciplinary team environment that includes those with lived experience?

Yes absolutely. Our team includes people with lived experience.

### List locations where students will be providing services **other than agency?**

Countywide opportunities exist for locations and exposure.

Does your agency allow students to videotape and/or audiotape clients for the purpose of presenting cases in their academic classes? Yes ☐ No ☒

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### Supervision:

*What types of supervision will be provided for the students and what is the licensure/discipline of the supervisor? Please specify below.*

Type	Hours Per Week	On Site Supervisor Degree/Discipline
Individual:	1	LCSW
Group:	1 ½	LCSW, MSW, MFT

What is the minimum ratio of supervision to client contact hours?

As needed /open door

Does your agency require a particular range of previous experience or specific prerequisite coursework? *If so please explain.*

Prefer 2<sup>nd</sup> year MSW student with some foundation therapeutic skills. Persons with lived experience of family members or personal mental health issues are encouraged to apply.

### Agency Application Process

**Mandatory requirements:** *Only students from academic institutions who have a current affiliation agreement with the Los Angeles County Department of Mental Health may be extended a placement opportunity. All students are processed through Human Resources Bureau. All prospective interns must obtain live scan clearance. All interns are required to complete a mandatory HIPAA Compliance and Sexual Harassment Prevention Training (for line staff) as part as the terms of their internship.*

DMH Staff completing this form: Helena Ditko, LCSW Title: Program Director

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Program Head: \_\_\_\_\_ Phone #: \_\_\_\_\_

District Chief: \_\_\_\_\_ Phone #: \_\_\_\_\_

Electronic Signature: Helena Ditko, LSCW Date: 03/12/2015